

# APPLICATION FOR BOUNDARY ADJUSTMENT



**APPLICANT NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**OWNER NAME** \_\_\_\_\_

\*\*if different from applicant, see below

**ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**OWNER NAME** \_\_\_\_\_

\*\*if different from applicant, see below

**ADDRESS** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**ADDRESS OF AFFECTED PROPERTY(S)** \_\_\_\_\_

**ASSESSOR'S PARCEL NUMBER(S)** \_\_\_\_\_

**LEGAL DESCRIPTION OF PROPERTY** - attach deeds for all affected properties \_\_\_\_\_

\_\_\_\_\_

**PRESENT LAND USE AND EXISTING STRUCTURES** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REASON FOR BOUNDARY ADJUSTMENT** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DESCRIBE THE BOUNDARY ADJUSTMENT** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Boundary Adjustment application, cont.

**CURRENT ZONING DISTRICT**\_\_\_\_\_

FEES: Payment of fees must be made at the time of application for the boundary adjustment. We strongly recommend an informal meeting be held with the Planning Department prior to submission of this application. Please call 874-7566 if you have any further questions about this process.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\*\*I hereby grant permission for \_\_\_\_\_  
(applicant)  
to apply for this procedure as my representative.

\_\_\_\_\_  
property owner's signature